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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/GB03/04487 10/16/2003 *OK Btz 1/18/07*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

UNITED KINGDOM 0224299.8 10/18/2002 *OK Btz 1/18/07*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 10	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Ron Gail</i> Examiner's Signature	<i>Btz</i> Initials			

## ADDRESS

23557

## TITLE

Cardiac monitoring apparatus and method

<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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